



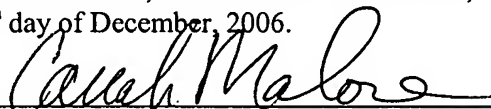
PATENT
Attorney Docket No. THI-002

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Teich et al.
SERIAL NO.: 10/688,791 GROUP NO.: 1655
FILING DATE: October 17, 2003 EXAMINER: B. Shen
TITLE: METHOD AND DEVICE FOR MEASURING MULTIPLE
PHYSIOLOGICAL PROPERTIES OF CELLS

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 15th day of December, 2006.


Carrah Malone

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith are:

1. Transmittal Form (1 page);
2. Fee Transmittal (1 page);
3. Amendment and Response (14 pages);
4. Petition for Extension of Time (1 page);
5. Supplemental Information Disclosure Statement (2 pages);
6. Form PTO-1449 (1 page);
7. Copies of References B23-25;
8. Check in the amount of \$1,200.00;
9. a return receipt postcard.



TRANSMITTAL FORM

Application Serial Number	10/688,791
Filing Date	October 17, 2003
First Named Inventor	Teich
Group Art Unit	1655
Examiner Name	B. Shen
Attorney Docket No.	THI-002
Patent No.	Not applicable
Issue Date	Not applicable

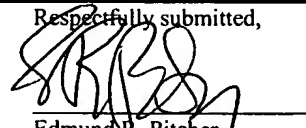
ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] <input checked="" type="checkbox"/> Petition for Extension of Time <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement <input checked="" type="checkbox"/> Form PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations B23-B25 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
--	---	---

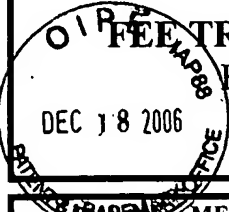
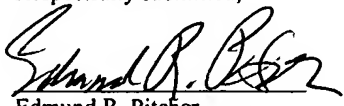
CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator
Goodwin Procter LLP
Exchange Place
Boston, MA 02109
Tel. No.: (617) 570-1000
Fax No.: (617) 523-1231

SIGNATURE BLOCK

Respectfully submitted,

Edmund B. Pitcher
Attorney for the Applicants
Goodwin Procter LLP
Exchange Place
Boston, MA 02109

Date: December 15, 2006
Reg. No. 27,829
Tel. No.: (617) 570-1780
Fax No.: (617) 523-1231

FEE TRANSMITTAL FY 2006		Complete if Known																																																																																									
		Application Serial Number	10/688,791																																																																																								
		Filing Date	October 17, 2003																																																																																								
		First Named Inventor	Teich																																																																																								
		Group Art Unit	1655																																																																																								
		Examiner Name	B. Shen																																																																																								
		Attorney Docket No.	THI-002																																																																																								
METHOD OF PAYMENT		FEE CALCULATION (continued)																																																																																									
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other		3. ADDITIONAL FEES <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>130</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>50</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>2,520</td> <td>2,520</td> <td>Request for ex parte reexamination</td> <td></td> </tr> <tr> <td>120</td> <td>60</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>450</td> <td>225</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>1020</td> <td>510</td> <td>Extension for reply within third month</td> <td>1020.00</td> </tr> <tr> <td>1590</td> <td>795</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>2160</td> <td>1080</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>500</td> <td>250</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>500</td> <td>250</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1000</td> <td>500</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>400</td> <td>400</td> <td>Petitions to the Commissioner (Gp. I)</td> <td></td> </tr> <tr> <td>200</td> <td>200</td> <td>Petitions to the Commissioner (Gp. II)</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Petitions to the Commissioner (Gp. III)</td> <td></td> </tr> <tr> <td>180</td> <td>180</td> <td>Submission of Information Disclosure Statement</td> <td>180.00</td> </tr> <tr> <td>790</td> <td>395</td> <td>Filing a submission after final rejection (37 CFR 1.129(a))</td> <td></td> </tr> <tr> <td>790</td> <td>395</td> <td>For each additional invention to be examined (37 CFR 1.129(b))</td> <td></td> </tr> <tr> <td>100</td> <td>100</td> <td>Certificate of Correction for applicant's error</td> <td></td> </tr> <tr> <td>130</td> <td>65</td> <td>Submission of Terminal Disclaimer</td> <td></td> </tr> <tr> <td colspan="2">Other fee (Specify)</td> <td></td> <td></td> </tr> </tbody> </table>		Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		120	60	Extension for reply within first month		450	225	Extension for reply within second month		1020	510	Extension for reply within third month	1020.00	1590	795	Extension for reply within fourth month		2160	1080	Extension for reply within fifth month		500	250	Notice of Appeal		500	250	Filing a brief in support of an appeal		1000	500	Request for oral hearing		400	400	Petitions to the Commissioner (Gp. I)		200	200	Petitions to the Commissioner (Gp. II)		130	130	Petitions to the Commissioner (Gp. III)		180	180	Submission of Information Disclosure Statement	180.00	790	395	Filing a submission after final rejection (37 CFR 1.129(a))		790	395	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		130	65	Submission of Terminal Disclaimer		Other fee (Specify)			
Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																								
130	65	Surcharge - late filing fee or oath																																																																																									
50	25	Surcharge - late provisional filing fee or cover sheet																																																																																									
130	130	Non-English specification																																																																																									
2,520	2,520	Request for ex parte reexamination																																																																																									
120	60	Extension for reply within first month																																																																																									
450	225	Extension for reply within second month																																																																																									
1020	510	Extension for reply within third month	1020.00																																																																																								
1590	795	Extension for reply within fourth month																																																																																									
2160	1080	Extension for reply within fifth month																																																																																									
500	250	Notice of Appeal																																																																																									
500	250	Filing a brief in support of an appeal																																																																																									
1000	500	Request for oral hearing																																																																																									
400	400	Petitions to the Commissioner (Gp. I)																																																																																									
200	200	Petitions to the Commissioner (Gp. II)																																																																																									
130	130	Petitions to the Commissioner (Gp. III)																																																																																									
180	180	Submission of Information Disclosure Statement	180.00																																																																																								
790	395	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																									
790	395	For each additional invention to be examined (37 CFR 1.129(b))																																																																																									
100	100	Certificate of Correction for applicant's error																																																																																									
130	65	Submission of Terminal Disclaimer																																																																																									
Other fee (Specify)																																																																																											
2. THE COMMISSIONER IS HEREBY AUTHORIZED TO CREDIT OR CHARGE ANY FEE INDICATED BELOW FOR THIS SUBMISSION TO DEPOSIT ACCOUNT NO. 07-1700. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit. 3. <input type="checkbox"/> Applicant claims small entity status.																																																																																											
FEE CALCULATION																																																																																											
1. FILING/SEARCH/EXAM/SIZE FEES <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>300</td><td>Utility filing fee</td><td></td></tr> <tr><td>500</td><td>Utility search fee</td><td></td></tr> <tr><td>200</td><td>Utility exam fee</td><td></td></tr> <tr><td>250</td><td>Utility size fee (each add'l 50 pgs. over 100)</td><td></td></tr> <tr><td>200</td><td>Design filing fee</td><td></td></tr> <tr><td>100</td><td>Design search fee</td><td></td></tr> <tr><td>130</td><td>Design exam fee</td><td></td></tr> <tr><td>250</td><td>Design size fee (each add'l 50 pgs. over 100)</td><td></td></tr> </tbody> </table> <table border="0" style="width: 100%;"> <tr> <td style="width: 15%;">Total Claims</td> <td style="width: 15%;">- 20 =</td> <td style="width: 15%;">x \$ 50.00 =</td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> <tr> <td>Independent Claims</td> <td>- 3 =</td> <td>x \$200.00 =</td> <td></td> <td></td> </tr> <tr> <td colspan="3"> <input type="checkbox"/> Multiple Dependent Claim(s), if any </td> <td>\$360.00 =</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">TOTAL:</td> <td></td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td></td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (1)</td> <td></td> <td></td> </tr> </table>		Large Entity Fee (\$)	Fee Description	Fee Paid	300	Utility filing fee		500	Utility search fee		200	Utility exam fee		250	Utility size fee (each add'l 50 pgs. over 100)		200	Design filing fee		100	Design search fee		130	Design exam fee		250	Design size fee (each add'l 50 pgs. over 100)		Total Claims	- 20 =	x \$ 50.00 =			Independent Claims	- 3 =	x \$200.00 =			<input type="checkbox"/> Multiple Dependent Claim(s), if any			\$360.00 =		TOTAL:					SMALL ENTITY DISCOUNT:					SUBTOTAL (1)																																					
Large Entity Fee (\$)	Fee Description	Fee Paid																																																																																									
300	Utility filing fee																																																																																										
500	Utility search fee																																																																																										
200	Utility exam fee																																																																																										
250	Utility size fee (each add'l 50 pgs. over 100)																																																																																										
200	Design filing fee																																																																																										
100	Design search fee																																																																																										
130	Design exam fee																																																																																										
250	Design size fee (each add'l 50 pgs. over 100)																																																																																										
Total Claims	- 20 =	x \$ 50.00 =																																																																																									
Independent Claims	- 3 =	x \$200.00 =																																																																																									
<input type="checkbox"/> Multiple Dependent Claim(s), if any			\$360.00 =																																																																																								
TOTAL:																																																																																											
SMALL ENTITY DISCOUNT:																																																																																											
SUBTOTAL (1)																																																																																											
2. AMENDMENT CLAIM FEES <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Claims Remaining After Amend.</th> <th>Highest No. Previously Paid For</th> <th>Present Extra</th> <th>Rate</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total</td> <td>- 20 =</td> <td>0</td> <td>x \$ 50.00 =</td> <td></td> </tr> <tr> <td>Indep.</td> <td>- 3 =</td> <td>0</td> <td>x \$200.00 =</td> <td></td> </tr> <tr> <td colspan="3"> <input type="checkbox"/> First Presentation of Multiple Dep. Claim </td> <td>+ \$360.00 =</td> <td></td> </tr> <tr> <td colspan="3" style="text-align: right;">TOTAL:</td> <td></td> <td>(\$)</td> </tr> <tr> <td colspan="3" style="text-align: right;">SMALL ENTITY DISCOUNT:</td> <td></td> <td>(\$)</td> </tr> <tr> <td colspan="3" style="text-align: right;">SUBTOTAL (2)</td> <td></td> <td></td> </tr> </tbody> </table>		Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	Total	- 20 =	0	x \$ 50.00 =		Indep.	- 3 =	0	x \$200.00 =		<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$360.00 =		TOTAL:				(\$)	SMALL ENTITY DISCOUNT:				(\$)	SUBTOTAL (2)					SUBTOTAL (3) (\$ 1200.00)																																																						
Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid																																																																																							
Total	- 20 =	0	x \$ 50.00 =																																																																																								
Indep.	- 3 =	0	x \$200.00 =																																																																																								
<input type="checkbox"/> First Presentation of Multiple Dep. Claim			+ \$360.00 =																																																																																								
TOTAL:				(\$)																																																																																							
SMALL ENTITY DISCOUNT:				(\$)																																																																																							
SUBTOTAL (2)																																																																																											
		SUBTOTAL (1) 0.00 SUBTOTAL (2) 0.00 SUBTOTAL (3) 1200.00																																																																																									
TOTAL		(\$ 1200.00)																																																																																									
CORRESPONDENCE ADDRESS		SIGNATURE BLOCK																																																																																									
Direct all correspondence to: Patent Administrator Goodwin Procter LLP Exchange Place Boston, MA 02109 Tel. No.: (617) 570-1000 Fax No.: (617) 523-1231 Customer No. 051414		Respectfully submitted,  Edmund R. Pitcher Attorney for the Applicants Goodwin Procter LLP Exchange Place Boston, MA 02109																																																																																									